## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number
028987. S2357 US

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |                            |   |              |                                   |              |                  | SMALL ENTITY TYPE   |                        | OR   | OTHER THAN<br>OR SMALL ENTITY |                        |
|--|----------------------------|---|--------------|-----------------------------------|--------------|------------------|---------------------|------------------------|------|-------------------------------|------------------------|
| TOTAL CLAIMS   |                            |   | X            |                                   |              |                  | RATE                | FEE                    | 1    | RATE                          | FEE                    |
| FOR-   |                            |   | NUMBER FILED |                                   | NUMBER EXTRA |                  | BASIC FEE           | 375.00                 | OR   | BASIC FEE                     |                        |
| TOTAL CHARGEABLE CLAIMS  |                            |   | 8 minus 20=  |                                   | *            |                  | X\$ 9=              | ·                      | OR   | X\$18=                        |                        |
| INDEPENDENT CLAIMS   |                            |   | 3 minus 3 =  |                                   | *            |                  | X42=                |                        | OR   | X84=                          |                        |
| ML   | JLTIPLE DEPEN              | NDENT CLAIM P                             | RESENT       |                                   |              |                  | +140=               |                        | OR   | +280=                         |                        |
| * If   | the difference             | in column 1 is                            | less than ze | ero, enter                        | "0" in c     | column 2         | TOTAL               |                        | OR   | TOTAL                         | 750                    |
| CLAIMS AS AMENDED - PART II  |                            |   |              |                                   |              |                  |                     |                        | 10   | OTHER                         |                        |
| _  |                            | (Column 1)<br>CLAIMS                      | (Colum       |                                   |              | (Column 3)       | SMALL               | ENTITY                 | OR   | SMALL                         |                        |
| AMENDMENT A  |                            | REMAINING<br>AFTER<br>AMENDMENT           |              | NUME<br>PREVIC<br>PAID I          | BER<br>OUSLY | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |      | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total                      | *   | Minus        | **                                |              | =                | X\$ 9=              |                        | OR   | X\$18=                        |                        |
|  | Independent                | *<br>ENTATION OF M                        | Minus        | ***                               | CLAINA       | =                | X42=                |                        | OR   | X84=                          |                        |
| _  | THOTTIESE                  | INTATION OF W                             | JUITE DEF    | PENDENT                           | CLAIM        |                  | +140=               |                        | OR   | +280=                         |                        |
|  |                            |   |              |                                   |              |                  | TOTAL<br>ADDIT. FEE |                        | اما  | TOTAL<br>ADDIT. FEE           |                        |
| _  |                            | (Column 1)                                |              | (Colun                            |              | (Column 3)       | ADDIT. FEE          |                        |      | ADDII, FEE                    |                        |
| AMENDMENT B  |                            | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHI<br>NUME<br>PREVIC<br>PAID I | BER<br>OUSLY | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |      | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total                      | *   | Minus        | **                                |              | =                | X\$ 9=              |                        | OR   | X\$18=                        |                        |
|  | Independent<br>FIRST PRESE | RST PRESENTATION OF MULTIPLE DEPENDE      |              |                                   | CL AIM       | =                | X42=                |                        | OR   | X84=                          |                        |
|  |                            |   | JEIN CE DEI  | LNDLIVI                           | OLANIVI      |                  | +140=               |                        | OR   | +280=                         |                        |
|  |                            |   |              |                                   |              |                  | TOTAL<br>ADDIT. FEE |                        | OR , | TOTAL<br>ADDIT. FEE           |                        |
|  |                            | (Column 1)                                |              | (Colum                            |              | (Column 3)       |                     |                        |      |                               |                        |
| AMENDMENT C  |                            | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHE<br>NUME<br>PREVIO<br>PAID F | BER<br>USLY  | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |      | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total                      | *   | Minus        | **                                |              | =                | X\$ 9=              |                        | OR   | X\$18=                        |                        |
|  | Independent                | *   | Minus        | ***                               | 01.4144      | =                | X42=                |                        | OR   | X84=                          |                        |
|  | I INOT PRESE               | NTATION OF MU                             | DETIPLE DEF  | ENDENT                            | CLAIM        |                  | +140=               |                        | OR   | +280=                         |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                            |   |              |                                   |              |                  |                     |                        |      |                               |                        |